



Tampa Bay Regional Meeting/Lunch

**Tuesday
June 14, 2011**

Registration Form

Return completed form with fee to FRA, P.O. Box 1757, Tallahassee, Florida 32302-1757. Checks accepted, or payments by Visa or MasterCard must be faxed to 850/222-3806. If you have any questions, contact Jan Piland at (850) 701-3622 or go to www.redevelopment.net.

Date: Tuesday, June 14, 2011
Time: 11:30 a.m. – 1:30 p.m.
Location: Mattison's Riverside
1200 1st Avenue
Bradenton, FL 34205
Phone: (941) 748-8087

Cost: \$20.00 (lunch included)

Full Name: _____ Nickname: _____

Title: _____ Agency Affiliation: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ FAX: _____ E-Mail: _____

Payment must accompany each form

\$20.00 (includes lunch)

☐ Check (Payable to **FRA**) ☐ Visa ☐ MasterCard

Credit Card Number _____

Card Billing Address: _____

Expiration Date _____ Security Code _ _ _

Card Holder's Name _____ Signature _____